respond to the survey items on a six-point Likert scale. Data were analysed using IBM SPSS Software Version 21.

Results A total of 96 clinicians responded to the questionnaire including doctors (n = 64), nurses (n = 27) and Operating Department Practitioners (n = 3). Overall participants scored more highly on attitudes (64.6%) than knowledge (63.7%). Participants scored the highest on sociology and psychology of pain (68.0%) (significantly higher than every other subscale) and lowest in physiology of pain (61.0%). No significant differences were found between doctors and nurses or between specialties. Participants who had either more than 50%, or 100% of their practice in paediatrics had better pain management knowledge and attitudes scores than those who had less than 50% or no paediatric practice.

Conclusions This study is the first to compare paediatric pain knowledge and attitudes across professional groups. Gaps in knowledge exist across professions and specialties. Nurses and medical staff have similar gaps in their knowledge and attitudes. There is a need to address these knowledge gaps and erroneous attitudes. Current methods of pain management education also need evaluating to ensure they are effective as possible.

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G36

USING REFERRALS FOR PSYCHOSOCIAL SUPPORT AS A QUALITY INDICATOR FOR AN EDUCATIONAL INTERVENTION

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Aims To assess the feasibility of referrals for social support as a locally designed Quality Indicator in the West Bank.

Methods Three quality indicators (referrals for social support, safe prescriptions and exclusive breast feeding at 6 months) were piloted to evaluate the success of a RCPCH supported Masters in Child Health (MACH) at Al Quds University. This MACH student collected data on the referral rate of children to a local psychosocial centre from her clinic population in Nablus and the data informed interventions.

Results In her reflection on the project DN wrote ‘after May I felt that there is something wrong because I advise people to go and I told the doctor working in my clinic to complete the referral form but the results didn’t improve. I thought I might need further help, so a friend working in the municipality as a social worker to go and to do home visits to these families and give me feed back’.

What emerged from the social worker was ‘people thought a referral to the Al Makhfia centre is just like a referral to the mental hospital, so even giving them a referral form they will not go there. The centre will not accept a patient without a formal referral, and didn’t do home visits. So my friend who was working with disabled children as a social worker, and already doing home visits as a follow up and treatment session, was the key to successful referrals’.

Conclusion Referrals for psychosocial support was sensitive Quality Indicator in this health system. Simply collecting data resulted in changes of behaviour at the clinic led by the MACH student and her conclusion at the end of the pilot was ‘I think that if we can arrange a day during the week or the month for the social worker to be with the team in the clinic, it will be very helpful to the patients and their families’.

G37(P)

AN ELEMENT OF COMPETITION CAN IMPROVE JOURNAL CLUB ENGAGEMENT

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Background Journal clubs (JC) can increase critical appraisal skills and aid in promoting evidence based practice.¹ Often, after an initial flourish, a JC’s popularity wanes.^{2,3} Innovative approaches to improving JC participation are required² but few have been described. In 2013, to increase nurse’s engagement with a hospital-wide nursing JC, a competition format was convened.

Aim To obtain an understanding of a competition elements impact on paediatric nurses JC engagement.

Method Twelve departments, of a dedicated paediatric hospital, were randomly assigned a month to present JC. Departmental nurses were supported to evaluate an article according to a

Abstract G37 Figure 1 Engagement by attendees with the nursing journal club (n = 65)

Abstract G37 Figure 2 Process of presenting at the nursing journal club (n = 18)

framework.⁴ A predetermined rubric guided marking. Post competition, with ethics committee approval (HREC-33167), all hospital nurses received an anonymous online survey invitation. Demographic, Likert scale and freeform information was collected. Questions elicited attitudes and perceived barriers or facilitators to JC. Freeform data was themed. Survey completers could provide separate details to win a voucher.

Results Compared to the previous year there was a significant increase in JC attendance (2013 mean = 22 vs. 2012 mean=10, t-test p = 0.00001). Full online survey responses were received from 289/1674 (response rate 17.3%) of sent invitations (non-attendees n = 224, attendees n = 65 (18 presenters)).

Overall, attendees reported JC had a positive impact on their professional engagement, as shown in Figure 1. Presenters rated highly the JC format as it developed skills and increased JC confidence, as shown in Figure 2. Freeform themes indicated issues of time, session location, JC advertising and increased topic variety.

Conclusion A competition format can increase nurses JC engagement and participation. Further work is required to establish applicability of this format to other settings.

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G38(P) EVALUATING A SERVICE TO SUPPORT MENTORS AND MENTORING IN STUDENT HEALTH VISITOR EDUCATION

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The government believes early intervention, ensuring families get the best start, will help to build a strong and stable society (DH 2011). The Implementation Plan 2011–15 (DH 2011) detailed the need to invest in a robust health visiting service, by increasing health visitor numbers by 50%. One key deliverable was increased training places delivered by Higher Educational

Institutions and supported by Practice Teachers in the community setting. To facilitate the extra training places for students, the Nursing and Midwifery Council (NMC 2011) produced guidance in utilising mentors, usually involved in pre-registration student nurse training, to work alongside the Practice Teachers in educating health visitor students.

This project involved participants in a process of inquiry to evaluate a service delivered by Practice Teachers, to support mentors and mentoring in Student Health Visitor education. Consideration of Stringer and Genat (2004) Look, Think and Act approach to Action Research led to the development of the research plan. A purposive sample of Practice Teachers, Student Practice Teachers and mentors participated. Data was collated through semi structured interviews, transcribed verbatim and analysed utilising a framework analysis approach.

The key findings were a positive evaluation of the support for mentors through supervision sessions, the lack of support around preparation of the mentors, the lack of support from management and the importance of support from team members. Failing students were seen as problematic. Willingness and an interest in education were crucial mentor attributes and future training was seen to lie with Practice Teachers and not mentors. Recommendation for practice highlighted the work that Practice Teachers and managers need to undertake in developing group supervision sessions, determining the future roles of Practice Teachers and mentors, evaluating the mentor training sessions and considering systems to support mentors with failing students.

G39(P) THE ROLE OF SIMBABY® IN ADVANCING UNDERGRADUATE NURSING AND MEDICAL EDUCATION

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Aims Since inception in 2006 an Inter-professional Education (IPE) project has become embedded within Children's Nursing and Medical Curricula at an internationally recognised university. Inter-professional high-fidelity simulation teaching using SimBaby® has been developed to provide an integrated approach to student learning and highlights the importance of teamwork, mutual respect and understanding of the roles of other professionals. It aims to assist students in developing the fundamental knowledge and skills required to assess and manage